

YOUTH SERVICES

RANDOM EMPLOYEE DRUG SCREEN NOTIFICATION

UNIT _____

DATE: _____

TO: _____

FROM: _____
(Facility Director / Regional Director, Undersecretary/designee)

RE: NOTIFICATION OF RANDOM DRUG SCREEN SELECTION

This shall serve as your official notification that you have been randomly selected by Public Safety Services Human Resources computer-generated selection process to participate in a random drug screen in accordance with YS Policy No. A.2.7 "Drug-Free Workplace", effective July 8, 2014.

You are to report to the secure care facility infirmary or the Occupational Health Center prior to the end of your tour of duty this date for the random drug screen, unless other arrangements have been cleared by the Facility Director/Regional Director or Undersecretary/designee.

Secure care facility staff is prohibited from leaving the facility prior to the drug screen. Doing so may result in disciplinary action. Failure to participate in the drug screen may also result in disciplinary action in accordance with YS Policy No. A.2.1 (b) "Employee Rules of Conduct".

If you have any questions, please contact the Facility Director / Regional Manager. Thank you in advance for your continued cooperation in meeting the mission of the Office of Juvenile Justice.

Employee Signature

Date

Time

c: PSS HR Office